

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/518605

CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|---|--------------------|------------|
| U.S. NATIONAL STAGE FEES | | |
| BASIC FEE | | |
| EXAMINATION FEE | | |
| SEARCH FEE | | |
| FEE FOR EXTRA SPEC. PGS. | 118 minus 100 = 18 | 150 = |
| TOTAL CHARGEABLE CLAIMS | 19 minus 20 = | |
| INDEPENDENT CLAIMS | 4 minus 3 = | 1 |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> | | |

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☒

OR

OTHER THAN SMALL ENTITY

| RATE | FEE |
|------------|-----|
| BASIC FEE | 150 |
| EXAM. FEE | 100 |
| SEARCH FEE | 200 |
| X \$ 125 = | 125 |
| X \$ 25 = | |
| X \$ 100 = | 100 |
| + \$ 180 = | |
| TOTAL | 675 |

OR

OR

OR

OR

OR

OR

| RATE | FEE |
|------------|-----|
| BASIC FEE | |
| EXAM. FEE | |
| SEARCH FEE | |
| X \$ 250 = | |
| X \$ 50 = | |
| X \$ 200 = | |
| + \$ 360 = | |
| TOTAL | |

CLAIMS AS AMENDED - PART II

Prelim.

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 19 | 20 | 1 |
| Independent | 4 | 4 | 1 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

SMALL ENTITY

OR

OTHER THAN SMALL ENTITY

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 25 = | 1 |
| X \$ 100 = | |
| + \$ 180 = | |
| TOTAL ADDIT. FEE | |

OR

OR

OR

OR

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 50 = | 1 |
| X \$ 200 = | |
| + \$ 360 = | |
| TOTAL ADDIT. FEE | |

1, 62, 68, 73
06/07/07

| | (Column 1) | (Column 2) | (Column 3) |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 19 | 20 | |
| Independent | 4 | 4 | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> | | | |

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 25 = | |
| X \$ 100 = | |
| + \$ 180 = | |
| TOTAL ADDIT. FEE | |

OR

OR

OR

OR

| RATE | ADDITIONAL FEE |
|------------------|----------------|
| X \$ 50 = | |
| X \$ 200 = | |
| + \$ 360 = | |
| TOTAL ADDIT. FEE | |

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".
 - *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.